

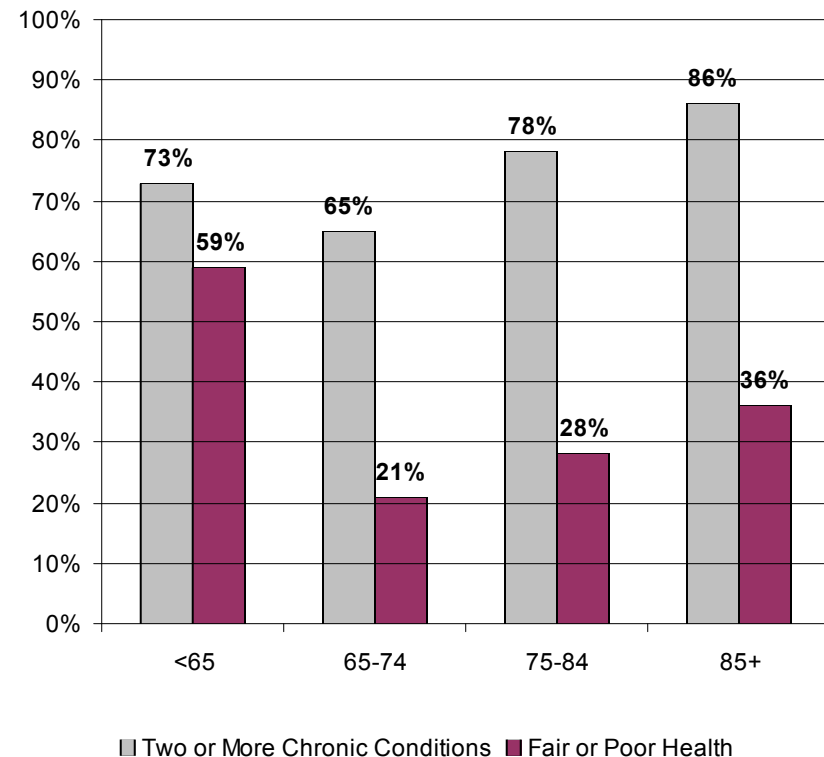
# Section 2

## Health Status

### Health Status, By Age

- Fifty-nine percent of disabled beneficiaries considered their health fair or poor, while only 21 percent of those aged 65 to 74 classified their health as fair or poor. The percentage of aged beneficiaries who reported their health as fair or poor increased with age.
- Seventy-nine percent of beneficiaries aged 85 or older reported some type of functional limitation. Sixty-seven percent of those over age 84 could not perform one or more ADL(s).
- As age increased, the percentage of aged beneficiaries with two or more chronic conditions also increased. Beneficiaries over age 84 were more likely to have Parkinson's Disease, Alzheimer's Disease, stroke, osteoporosis or a broken hip. Cancer rates were highest for beneficiaries in the 75 to 84 age group. Disabled beneficiaries had higher than average rates of diabetes and Pulmonary disease.
- Sixty-four percent of beneficiaries over age 84 said they had never smoked. The percentage of beneficiaries who have never smoked increased significantly in the higher age groups.
- Overall, community beneficiaries over age 74 were the most likely to receive flu or pneumonia shots.

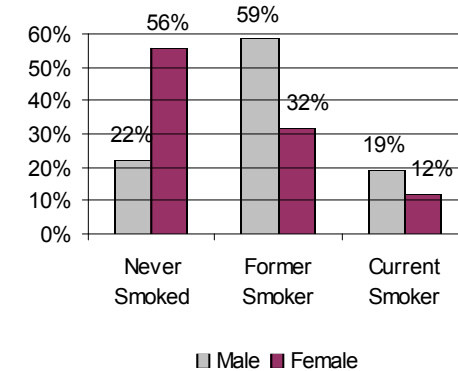
**Beneficiaries with Two or More Chronic Conditions and Fair or Poor Health, By Age**



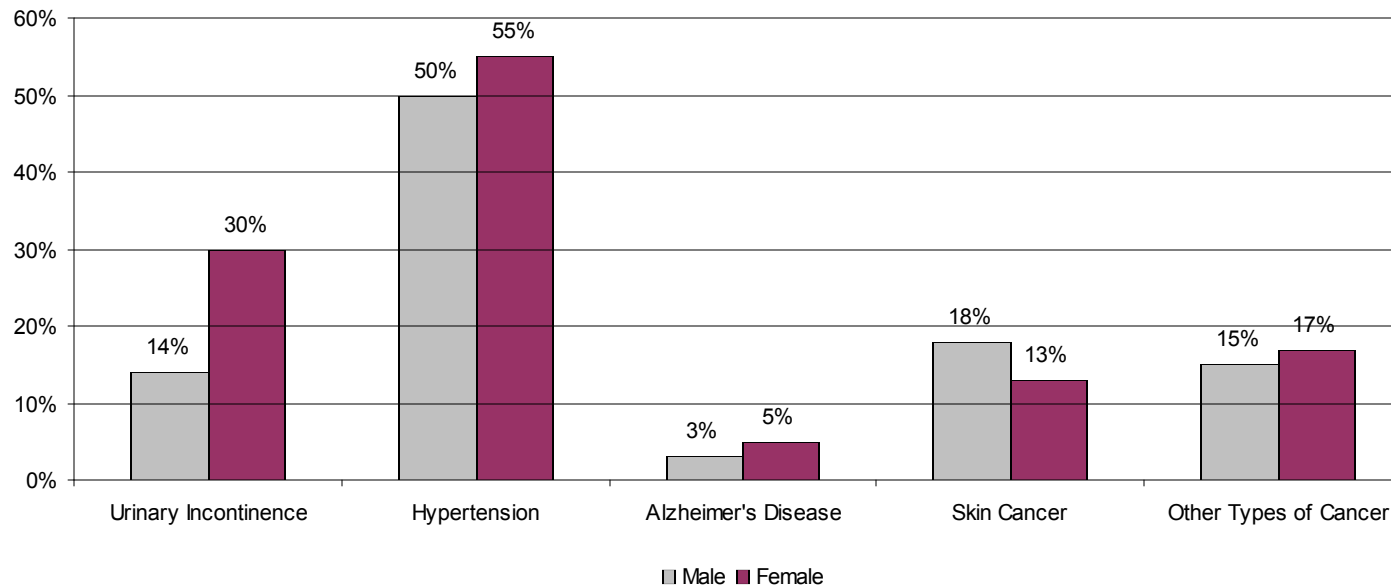
### Health Status, By Gender

- Male beneficiaries had higher rates of Pulmonary Disease and skin cancer. Female beneficiaries had a higher incidence of osteoporosis and broken hip (22 percent of all females as compared to five percent of all males), Alzheimer's Disease, urinary incontinence, arthritis, hypertension, and cancer (excluding skin cancer).
- Forty-one percent of female beneficiaries over age 84 reported they could not perform three to six ADLs compared to only 33 percent of men in that age group.
- Seventy-two percent of female beneficiaries compared to 62 percent of male beneficiaries had two or more chronic conditions.
- A large portion of female beneficiaries never smoked while most male beneficiaries were former or current smokers.

### Smoking, By Gender

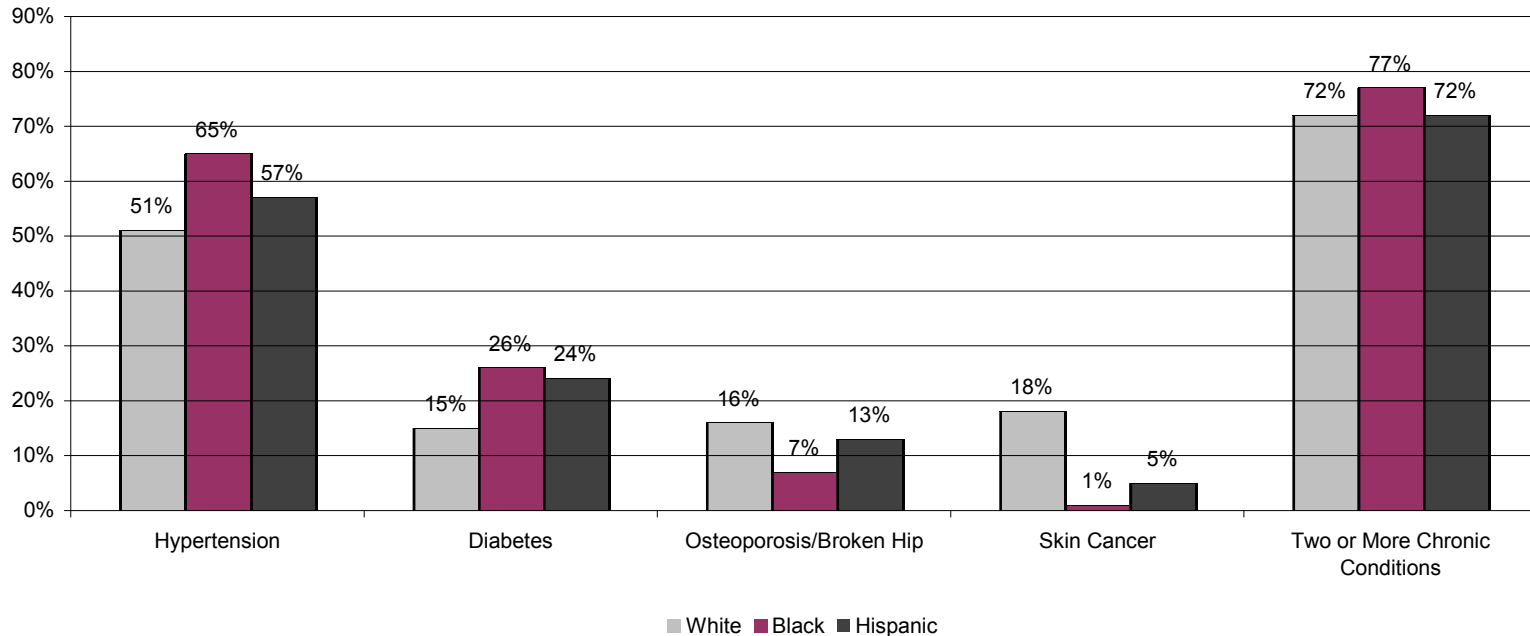


### Diseases/Conditions, By Gender



## Health Status, By Race and Ethnicity

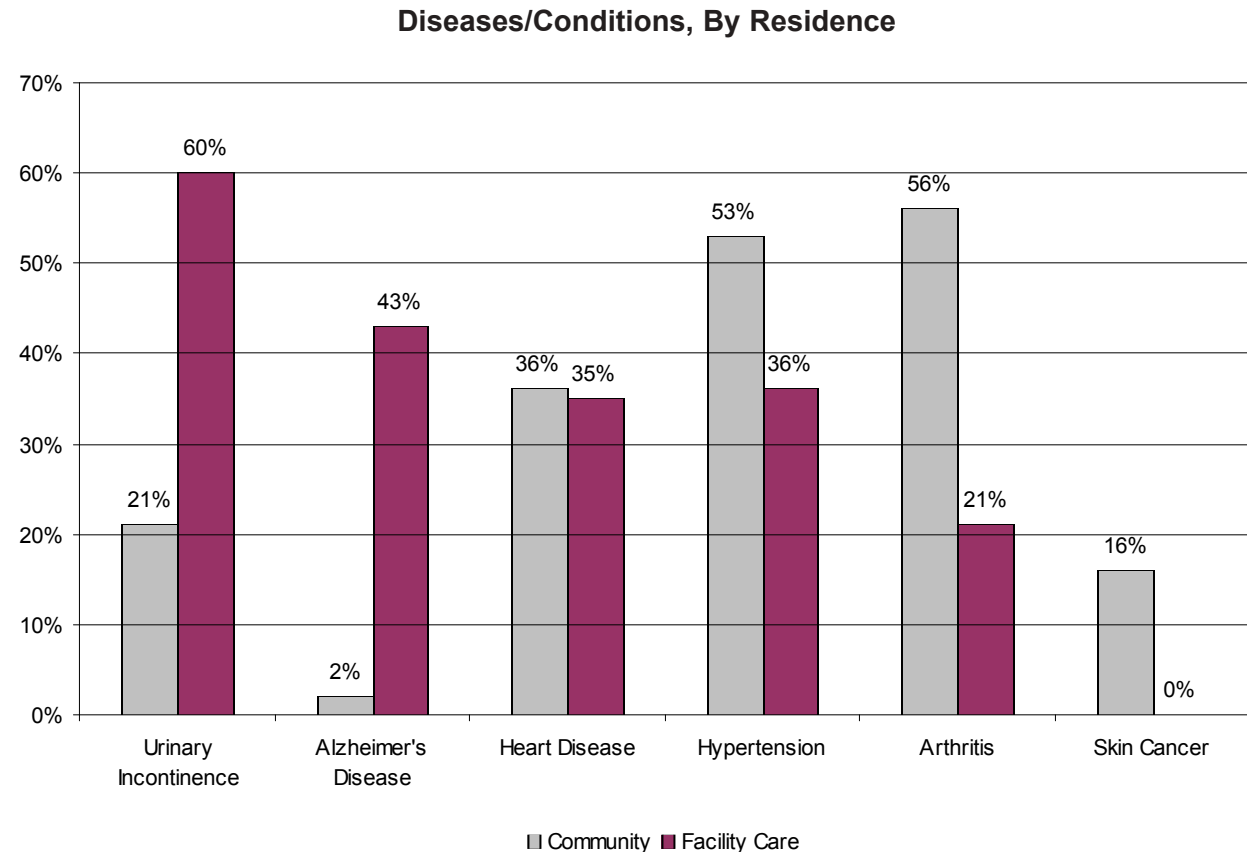
### Diseases/Conditions, By Race and Ethnicity



- Forty-two percent of white beneficiaries compared to only 28 percent of Hispanic and 26 percent of black beneficiaries considered their health very good or excellent.
- A higher percentage of black beneficiaries had two or more chronic conditions than Hispanic or white beneficiaries. Black and Hispanic beneficiaries had a higher incidence of hypertension and diabetes than white beneficiaries, but had lower rates of osteoporosis, broken hip, and skin cancer.
- Black beneficiaries were more likely than Hispanic or white beneficiaries to have one or more functional limitation(s).
- A larger percentage of black beneficiaries currently smoked (21 percent) than Hispanic or white beneficiaries (14 and 15 percent respectively). Hispanic beneficiaries were the most likely to have never smoked.

## Health Status, By Residence

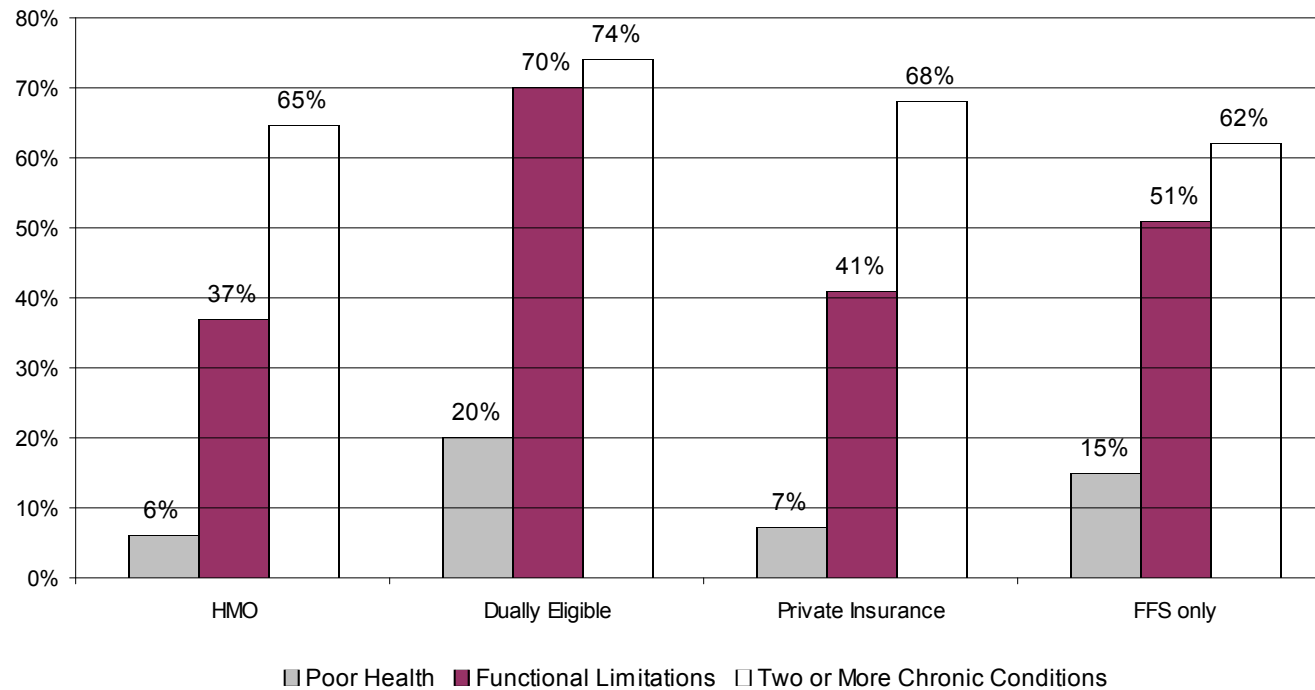
- Although most beneficiaries in the community reported their health status as good, this varied by living arrangement. A greater percentage of beneficiaries in excellent health lived with a spouse, while a greater percentage of beneficiaries in poor health lived with children or others. Sixty-two percent of beneficiaries living in facility care were reportedly in fair or poor health.
- All beneficiaries in facilities had some functional limitation and 93 percent were unable to perform one or more ADL(s). In the community about 61 percent of those that lived with children or others had a functional limitation. In comparison, functional limitations were reported by only 48 percent of those who lived alone and 39 percent of those who lived with a spouse.



- Seventy-one percent of beneficiaries in facilities had two or more chronic conditions compared to only 68 percent of beneficiaries living in the community.
- Beneficiaries in facility care had much higher rates of urinary incontinence and Alzheimer's Disease. Beneficiaries in the community had higher rates of hypertension, arthritis, and skin cancer.

## Health Status, By Insurance Type

### Beneficiaries in Poor Health, with Functional Limitations, Two or More Chronic Condition/Diseases, By Insurance Type



- Dually eligible beneficiaries were much more likely than other community beneficiaries to be in poor health, have some type of limitation, and have more than one chronic condition.
- Beneficiaries in Medicare HMOs were less likely to be in poor health or have functional limitations than other community beneficiaries.